



## **Exhibitor Request Form / Agreement**

Governor's Council for People with Disabilities  
November 27 & 28, 2007, Hyatt, Indianapolis

(Please print or type)

Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_ ) \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_ I would like to receive the Council's On Target newsletter \_\_\_\_ I would like to receive bimonthly e-mail news

Exhibitors, who wish to register and attend the conference sessions, may use this form to do so by checking the line for conference registration and including the payment with the exhibitor fee. If you need a hotel room, please contact the Hyatt directly and identify yourself as attending the Governor's Council for People with Disabilities Conference. Rates below - plus 15% tax:

		Rates
Hyatt Regency Indianapolis	Single	\$ 83/day
One S. Capitol Ave.	Double	\$ 108/day
Indianapolis, IN 46204	Triple	\$ 133/day
(317) 632-1234	Quad	\$ 158/day
Hotel overnight reservation deadline is Wednesday, Nov. 7, 2007		

**Deadline for submitting Exhibitor Form and Payment - September 17, 2007 to be assured of being listed in the program.**

Please check all that apply:

____ Exhibitor table - 6 ft skirted table	\$195.00	<b><u>On Site</u></b>
____ 8 ft space for self-standing display	\$185.00	
____ Electricity (110) ...\$25 per day in advance....\$30 each day of conf	\$ 60.00	
____ Full conference registration (see conference at a glance)	\$135.00	<b>\$150.00</b>
____ Thursday only (includes meals and reception)	\$ 80.00	<b>\$ 95.00</b>
____ Friday only (includes continental breakfast and award luncheon)	\$ 80.00	<b>\$ 95.00</b>
<b>Total Amount Paid</b>	<b>\$ _____</b>	

**Make check payable to:** Sandy Kite Hunt, Coordinator  
**Mail to:** 2007 Disability Conference  
PO Box 47933  
Indianapolis, IN 46247-0933  
**For more information:** Sandy Kite Hunt; 317-786-7272  
SKH4HOG@comcast.net

### **Cancellation Policy:**

A written cancellation is required 30 days prior to the Conference for a refund. Cancellations are subject to a \$30 administration fee.

## **Exhibitors Contract Agreement**

Exhibitor assumes total responsibility and liability for losses, damages, and claims arising out of injury to persons or damage to exhibitor's displays, equipment or other property brought upon the premises of the Hyatt Hotel and agrees to indemnify, defend and hold harmless the group, the Hyatt Hotel, and its owners, servants, agents, and employees against all claims or expenses for such losses, including reasonable attorney's fees, arising out of the use of the hotel premises excluding any liability caused by the negligence of the Governor's Council for People with Disabilities and its employees or the Hyatt Hotel or its owners, servants, agents and employees.

The Exhibitor understands that neither the Governor's Council for People with Disabilities its employees nor the Hyatt Hotel maintains insurance covering the Exhibitor's property or lost revenue and it is the sole responsibility of the Exhibitor to obtain such insurance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_